

POLICY MANUAL

**State Mental Health, Mental Retardation and Substance Abuse Services Board
Department of Mental Health, Mental Retardation and Substance Abuse Services**

POLICY 1030(SYS)90-3 Uniform Data Collection Requirements in Community Services Boards and State Facilities

Authority	<hr/> Board Minutes Dated <u>June 27, 1990</u> Effective Date <u>June 27, 1990</u> Approved by Board Chairman <u>s/Greer D. Wilson, Ed.D.</u> <hr/>
References	<hr/> Information Management Plan, DMHMRSAS, 1993 Financial Management Standards and Accounting Procedures for CSBs Manual, DMHMRSAS, 1987 NIMH-Mental Health Statistics Improvement Program NIDA-Guidelines for Uniform Data Reporting for Substance Abuse Clients, 1989 ADAMHA Reorganization Act of 1992 (PL 102-321): Substance Abuse Prevention and Treatment Block Grant (SAPT) and the Community Mental Health Services Block Grant (CMHS)] Mental Health Plan of Virginia CSB Performance Contract State Facility Director Performance Agreements <hr/>
Background	<hr/> The Department recognizes development of comprehensive management information systems and the use of data that these systems produce as being integral to the effective and efficient management of client services, fiscal and human resources. Recent, and anticipated requirements imposed by state and federal entities mandating closer scrutiny of the manner in which funds have been spent and assurances of the quality and effectiveness of services serve as an impetus to establish policies with regards to data management. <hr/>

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Background (Continued)

Initial efforts to standardize data collection for CSBs and state facilities were initiated by the Department in collaboration with the Virginia Association of Community Services Boards' Data Task Force and representatives from state facilities. This collaboration resulted in the Core Services Taxonomy, the Individualized Client Data Elements (ICDE), and the CSB Performance Contract which established routine reporting requirements and a minimum data set for CSBs and state facilities.

In 1993, the VACSB established the Administration Committee as a standing committee that includes Department staff to routinely review and update data collection and reporting documents as one of its responsibilities. In 1993, the Reporting Requirements for Community Services Board Manual was developed by the Committee that incorporates the Core Services Taxonomy, ICDE and reporting requirements.

The Information Management Plan (IMP) was developed in 1987 to define the automation plans for CSBs and state facilities. The plan is updated annually. A strategic plan is in progress that will include the technologies required to support an integrated service system. Release of the strategic plan is scheduled for July, 1994 and will replace the IMP.

The Financial Management Standards and Accounting Procedures for CSBs includes procedures for maintaining uniform fiscal reporting systems that provide cost, revenue, and expenditure data from community services boards. It was first developed in 1987 and updated as changes were required. A major revision is in progress and will be issued in late 1993.

Purpose

To establish and maintain a current policy for the development of consistent data collection requirements in community services boards and state facilities.

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General Policy

It is the policy of the State Mental Health, Mental Retardation and Substance Abuse Services Board that the Department of Mental Health, Mental Retardation and Substance Abuse Services shall incorporate client/patient/resident, service, fiscal, and human resources data into planning, management, and operations decisions and shall establish consistent data collection and data reporting requirements for community services boards and state facilities to address this policy.

Policy for Department

The Department shall identify points of contact within the Central Office, for coordination of:

- the design of automated systems of data collection,
- the collection of state facility and community services data,
- the coordination of responses to requests for client/patient/resident, service, fiscal and human resource data from state facilities and community services boards, and
- the routine audit for accuracy and reliability of automated data.

The Department shall establish the automated information systems necessary to achieve the following objectives:

- Assisting CSBs and state facilities to reduce paper work to maintain clinical records and client/patient/resident and service data
 - Tracking the movement of patients, clients, and residents among state facilities, between state facilities and community programs and among community programs;
 - Measuring performance/service indicators which will be established to determine the outcomes of services;
 - Supporting the development of an integrated system of quality care producing data that promotes accountability, cost-effectiveness, and service outcomes
 - Addressing federally mandated client, service and manpower data reporting requirements; and
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Policy for Department (Continued)

- Establishing a data collection mechanism in which the Department, each state facility, and each community services board has access to the fiscal, client/patient/resident, service and human resources data which will be mutually agreed upon as critical to the management and operation of the Virginia mental health, mental retardation, and substance abuse services system.

The Department shall develop and maintain uniform fiscal reporting standards that provide cost/revenue/expenditure data from community services boards and state facilities on a quarterly basis. The Department shall, in conjunction with the community services boards, review these uniform fiscal reporting standards and minimum fiscal data elements and revise them as needed to comply with state and federal reporting requirements.

The Department, in conjunction with the CSBs and facilities, shall develop procedures which ensure the confidentiality of shared client data. Documentation of such policies and plans shall be made available upon request from the Department.

The Department shall make available technical assistance and guidance to community services boards and state facilities in the procurement of automated data processing hardware and software. The Department shall review any proposed hardware and software system with the CSB or State facility to ensure that the system has the capability to meet the requirement of this policy. The Department shall exercise authority to deny departmental financial participation in the procurement of any hardware and software system which does not enhance or improve the ability to meet the requirements of the uniform data collection policy. Where possible, the Department shall provide technical assistance and funding to support ongoing training of MIS and data management staff at facilities and CSBs.

Policy for CSBs

Each community services board shall develop policies and plans for ensuring the confidentiality, timeliness, quality and reliability of automated data.

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Policy for Commissioner

The Commissioner shall provide for formal liaison with the Administration Committee of the Virginia Association of Community Services Boards. Further, the Commissioner shall ensure the involvement of the Administration Committee in issues pertaining to:

- data collection and reporting activities of the Department, CSBs and facilities;
- the development of uniform definitions and conventions used in data collections; and
- the review of procedures to ensure they are within the parameters of laws on confidentiality.

The Commissioner shall ensure that compliance with this policy is incorporated into the annual CSB and facility performance contracts and that the State Mental Health, Mental Retardation and Substance Abuse Services Board is provided an annual report of compliance. Further the Commissioner shall document the fiscal impact of compliance with this policy and, where possible, provide human and/or fiscal resources to CSBs and facilities to ensure successful compliance.

Monitoring of This Policy

The Commissioner shall assign a staff coordinator who will develop a plan for implementation, monitoring and evaluation of this policy.